


- ☐ Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- ☒ Checks in the amount of **\$1,020.00** to cover the 3-month Extension of Time fee and **\$790.00** to cover the RCE fee are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344


Juan Carlos A. Marquez
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REED SMITH LLP
3110 Fairview Park Drive, Suite 1400
Falls Church, Virginia 22042
(703) 641-4200
April 17, 2007



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

TAMAKI et al.

Application Number: 09/897,929

Filed: July 5, 2001

**For: APPARATUS AND METHOD FOR DYNAMICALLY
ALLOCATING COMPUTER RESOURCES BASED ON
SERVICE CONTRACT WITH USER**

Attorney Docket No. ASAM.0011

Art Unit 2152

**Examiner
Doan, Duyen My**

**Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	2	1	(Over 20)	x \$50	0
Independent Claims	1	1	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
				TOTAL	0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

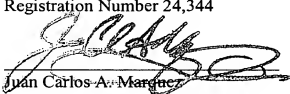
[x] Response/Preliminary Amendment
(with Claim Amendments)
[] Preliminary Amendment
[] Substitute Specification
[] Other _____

[x] Petition for 3-month Extension of Time
[] Information Disclosure Statement w/for 1449
[] Letter to Draftsperson
[] _____ sheet of drawings
[x] Request for Continued Examination

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